PTO/SB/01 (10-00)

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DECLARATION AND			Attorney Do	cket Number	ASP-5010				
POWER	First Named Inventor Szu-Min Lin								
	LITY OR DESIGN APPLICATION		COMPLETE IF KNOWN						
	CFR 1.63)	urcharge	Application	Number					
Declaration Submitted wit Initial Filing (unexecuted)			Filing Date						
			Group Art U	Init					
	Examiner Name								
As a below named inventor, I hereby declare that:									
My residence, mailing address, and citizenship are as stated below next to my name.  I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
MIST STERILIZATION SYSTEM (Title of the Invention)									
the specification of which		-							
is attached hereto									
OR									
was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)									
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application	Country		iling Date	Priority Not Claims	Certified Copy				
Number(s)	Country	(mm) DL	DMYYY)	Not Claime	d Attached? YES NO				
Additional foreign applic	Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:								

DECLARATION - Utility or Design Patent Application								
	C. 119(e) of any United States provisional	application(s) listed below.						
Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.						
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:								
Application Serial No.	Filing Date	Status						
I hereby appoint:								
Practitioners at Customer Number	Place Customer Number Bar Code Label Here							
Practitioner(s) named below:  Name  Registration Number								
as my/our attormey(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.								
Address all telephone calls to Andrew C. Farme	r at telephone number (732) 524-2825.							
Customer Number  Direct all correspondence to:  or Bar Code Label  000027777  OR  Correspondence address below  Name:								
		,						
Address:								
Address:								
City:	State:	ZIP						
Country	Telephone:	Fax:						

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I hereby declare that all statements made h rein of my own knowl dge are true and that all statements made on information and belief are beli ved t be tru; and further that these stat m nts were mad with th knowledg that willful false statements and the like so made ar punishable by fin or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false stat ments may jeopardize the validity of the application or any patent issued there in.							
NAME OF SOLE OR FIRST INVENTOR:	□Ар	etition has been filed for this unsigned inventor					
Given Name (first and middle [if any]) Szu-Min			Family Name or Surname Lin				
Inventor's Signature				Date			
Residence: City Laguna Hills	State CA	State CA Cour		try USA	Citizenship USA		
Mailing Address 25632 Rain Tree Road							
City Laguna Hill	State CA	ZIP 92653			Country USA		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SECOND INVENTOR:	AME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any]) Robert			Family Name or Surname Lukasik				
Inventor's Signature				Date			
Residence: City Lake Elsinore	State CA	Country USA		ry USA	Citizenship USA		
Mailing Address 14911 Amorose Street							
City Lake Elsinore	State CA				Country USA		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF THIRD INVENTOR:	NAME OF THIRD INVENTOR:  A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname					
Inventor's Signature			Date				
Residence: City	State		Countr	ry	Citizenship		
Mailing Address							
City	State	2	ZIP		Country		